

[Date]

[Insured Name]

[Street Address]

[City, State, Zip Code]

RE: Notice of Non-Renewal of Umbrella Liability Policy

Policy Number: [Policy Number]

Expiration Date: [Expiration Date]

Dear [Insured Name],

Please be advised that [Insurance Company Name] will not be renewing your Umbrella Liability insurance policy when it expires on [Expiration Date]. As of 12:01 AM on that date, your coverage under this policy will terminate.

This decision was made due to your payment history over the past policy term. Specifically, our records indicate [Insert specific reason, e.g., multiple late payments / previous cancellations for non-payment], which no longer meets our underwriting requirements for this type of coverage.

To avoid a gap in your liability protection, we recommend that you contact your insurance agent immediately to secure replacement coverage with another provider. An umbrella policy provides vital protection in excess of your primary auto and homeowners limits.

If you believe there has been an error regarding your payment records or if you have questions regarding this notice, please contact our Customer Service Department at [Phone Number].

Thank you for your past business.

Sincerely,

[Name of Representative/Underwriter]

[Insurance Company Name]